

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the **reverse** so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Millard H. McWhorter, III, M.D.
Covington County Jail
290 Hillcrest Drive
Andalusia, AL 36420

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Debra D. McWhorter

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Debra D. McWhorter

C. Date of Delivery

3/5-06

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7003 2260 0005 4584 6460

Domestic Return Receipt

5-02-M-1540